

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_ FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/		/	
2		/		/		/
3		/		/		/
4		/		/		/
5		/		/		/
6		/		/		/
7		/		/		/
8		/		/		/
9		/		/		/
10		(1)	(2)	9		9
11				/		/
12				/		/
13		(1)	(2)			/
14						
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49						
50						
TOTAL IND.	1		1		1	
TOTAL DEP.	12	200	200	200	200	200
TOTAL CLAIMS	1	200	200	200	200	200

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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97						
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

(3)

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS